

APPLICATION FOR PEDDLERS, ITINERANT VENDORS, HAWKERS, SOLICITORS AND CANVASSERS

Please read the attached material relating to a Peddler's/Solicitor's Permit before completing the form. Permits are issued to individuals and each person must complete a separate application. This permit will be issued or denied within five (5) business days of submission of all required information and documentation and provided that the application and documentation are readable. The application fee of \$50.00 must be paid at the time the application is submitted and is non-refundable. Fees for persons representing non-profit, charitable organizations will be waived upon proof of non-profit status. Permits for itinerant vendors are issued for a 72-hour continuous period, not more often than once every 90 days. All other permits are issued for one month.

PLEASE PRINT CLEARLY IN BLACK INK OR TYPE.

Applicant's Full Name: (No Nicknames)	 (Last)	(First		(Middle)
(NO NICKHAIIIES)	(Last)	(11130	J	(iviidale)
Daytime Phone No E-mail address:				
Permanent Address:				
Street Number& Street Name		City	State	Zip
Temporary/Local Address	(if different from	above):		
Street Number& Street Name		City	State	Zip
Date of Birth:	ate of Birth: Place of Birth:		າ:	
Height: We	ght:	Hair Color:	Eye Color:	
Social Security No				
Driver's License No.: OR	ver's License No.:		State iss	sued
ស on-Driver Official ID No:		State Iss	State Issued:	
		meanor involving theft, frances and dates:		•
		f any type or do you have a		

If yes, please list offenses and dates:				
Occupation in which the applicant d	osiros to ongago and for which	s /ha dasiras tha narmit:		
Occupation in which the applicant of	esiles to eligage and for which	sylle desiles the permit.		
Complete description of goods, ware	es, products and or services wl	nich the applicant desires to	sell:	
List the motor vehicle make, model, the applicant:	year, color, license number a	nd state issued of any vehicle	e to be used b	
Name and Address of Business for w	hich the permit is requested:			
Business Address	City	State	Zip	
Business Phone Number:	Web site add	ress:		
Name of Supervisor:				
Supervisor's Phone No	Email add	Email address		
The location where books and record available for inspection to determine			ch shall be	
Address	City	State	Zip	

Contact Person		P	hone Number	
ADDITIONAL F	FOR ITINERANT VENDORS OR HAWKERS	S		
Property addre	ess on which you wish to sell.			
Property Owne	er's Name and full address			
' '				
Owner's phone	e number	C	wner's email addre	SS
ADDITIONALE	TOD COLICITODS Information and annual	: - f	+hd	h
ADDITIONAL F	FOR SOLICITORS – Information concern	ing for whom	the donations are t	to be accepted.
Organization n	 าame			
Organization's	s street number and name	City	State	Zip
Contact person	n for the organization	phone nu	mhar	email address
Contact person	n for the organization	priorie riu	IIIDEI	eman address
For all applica	ints, I have enclosed the following iter	ms as part of	my application and	have initialed each
relevant item.	_		7 - 1 - 1 - 1 - 1	
1.	A copy of my current driver's licen		-	fication card. The copy
	must be clearly readable and may n	ot be reduce	d in size.	
2	A copy of the cales tay named ics	d to the ev	anligant by the Cta	to of Toyos Any namely
2.	A copy of the sales tax permit issu claiming exemption from state sal			
	Exemption Certificate.	les tax silali .	silow proof thereo	i by a lexas state lax
	Exemption determate.			
3.	A headshot recent photo of the appl	licant. If apply	ying in person, city s	staff can take a photo.
4.	A copy of the applicant's current he			
	be sold provided, however, this sha			
	prepared and packaged by a national			•
	by the State and Harris County Healt	in code, ii suc	ii packages are und	TUKETI.
5.	If working for a company, a certific	ate or letter	from the president	. vice-president. general
	manager, sales manager or district of			
	works, sells or solicits, stating that			• •
	company.			
6.	If requesting a waiver of fee, proof o	of non-profit c	haritable status.	

7.	Permit application fee in the amour	t of \$50.00 per person. The fee is non-refundable.
In addition,	Itinerant vendors must supply the fo	lowing:
8.		owner or a written statement from the property owner operty. The statement is to be signed and dated and may use the property.
9.	A dimensional or scaled site plan parking area. The parking area mus	ndicating the location of the display area, curb cuts and t be an all-weather surfaced area.
10.	•	one unisex portable facility or submit a written statement ing permission to use inside sanitary facilities which must of the temporary business.
For all applica	nts, by signing below, you agree to t	ne following:
		cion regarding the issuance of a permit and that I have formation submitted is true and correct.
	rstand that I will be disqualified for ar or for failure to furnish any required in	y false statements and/or for the submission of any false formation.
-	e in compliance with all applicable city pliance will result in the revocation of	ordinances, including zoning ordinances and I understand any permit issued.
		nother between the hours of 8:00 a.m. and one-half hour ed by the city will be in full view at all times.
posted stating occupant that	g, "No peddler is allowed" or other sin I must leave the premises. If I fail to	erty owned, leased or rented to another where a sign is ilar posted sign or after being verbally notified by the do so, I may be deemed guilty of criminal trespass or ovided in V.T.C.A. Penal Code 15.01, 30.05.
charges and		nd that I may be disqualified if there are pending criminal a convicted of any felony or of a misdemeanor involving
I understand t	hat the permit fee is paid at the time	of application and is non-refundable.
Signature of A	pplicant	 Date

For City of Seabrook Use ONLY

Zoning Approval (for Itinerant Vendors)	Approved	Refused
Conditions:	 	
Signature:		Date:
Police Approval (If applicable)	Approved	Refused
If refused, reason for refusal	 	
Conditions:		
Signature:		Date:
City Secretary Approval	Approved	Refused
If refused, reason for refusal		
Conditions:	 	
Permit No.	 issued on	
Signature:	 	 Date: